| Effective December 8, 2004 |   |   |                                      |   |                            |  |              |                     | 10/517/07  |    |                     |                        |
|----------------------------|---|---|--------------------------------------|---|----------------------------|--|--------------|---------------------|--|----|---------------------|------------------------|
| CLAIMS A                   |   |   |                                      | (Column 1)  |                            | (Column 2)                             |              | MALL ENT            |  | OR | OTHER<br>SMALL I    | THAN                   |
| U.S                        | . NATIONAL  | STAGE FEES  |                                      |   |                            |  |              | RATE                | FEE  | 1  | RATE                | FEE                    |
| BAS                        | SIC FEE   |   | SMALL E                              | NT. = \$ 150  | LAR                        | GE ENT. = \$ 300                       | 1 5          | ASIC FEE            |  | OR | BASIC FEE           | 2/1)                   |
| EX                         | AMINATION FE  | <u> </u>  |                                      | Satisfies PCT Article 33(1)-<br>(4) = \$50 / \$ 100                     |                            | other situations =<br>\$ 100 / \$ 200  | 1            | KAM. FEE            | <del>                                     </del> | 1. | EXAM. FEE           | 粉                      |
| SEARCH FEE                 |   |   | U.S. is ISA :                        | U.S. is ISA = \$50 / \$ 100<br>ALL other countries =<br>\$ 200 / \$ 400 |                            | ALL other situations = \$ 250 / \$ 500 |              | EARCH FEE           |  |    | SEARCH FEE          | 400                    |
| FEE                        | FOR EXTRA S   | SPEC. PGS.  | n                                    | minus 100 =   |                            | / 50 =                                 |              | X \$ 125 =          |  | 1  | X \$ 250 =          |                        |
| тот                        | TAL CHARGEA   | BLE CLAIMS  | 15                                   | minus 20 =  | •                          | •                                      |              | X \$ 25 =           |  | OR | X \$ 50 =           |                        |
| IND                        | EPENDENT CL   | AIMS  | 4                                    | minus 3 =   |                            |  | <b>1</b> [;  | X \$ 100 =          | -  | OR | X \$ 200 =          | 7/1                    |
|                            |   | IDENT CLAIM PRE   |                                      |   | <u> </u>                   |  | 1            | + \$ 180 =          |  | OR | + \$ 360 =          | e sa                   |
| • If                       | the difference  | e in column 1 is l  | less than zo                         | ero, enter "/   | 0" in co                   | olumn 2                                | <u> </u>     | TOTAL               |  | OR | TOTAL               |                        |
|                            | CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 2)  CLAIMS HIGHEST |   |                                      |   |                            | (Column 3)                             | , L          | SMALL E             |  | OR | OTHER<br>SMALL E    | NTITY                  |
| AMENDMENT A                | 4125/06   | REMAINING<br>AFTER<br>AMENDMENT   |                                      | NUMI<br>PREVIO<br>PAID  | MBER<br>OUSLY              | PRESENT<br>EXTRA                       |              | RATE                | ADDI-<br>TIONAL<br>FEE                           |    | RATE                | ADDI-<br>TIONAL<br>FEE |
| MON                        | Total   |   | Minus                                |   |                            | •                                      | ] <u>L</u> : | X \$ 25 =           |  | OR | X \$ 50 =           |                        |
| AME                        | Independent   | . 00  | Minds V                              | ) kin   | ン<br>                      | <b>5</b>                               | <b>l</b> [>  | <b>(\$100 =</b>     |  | OR | X \$ 200 =          |                        |
|                            | FIRST PRES  | ENTATION OF M   | ULTIPLE DE                           | EPENDENT  | CLAIM                      |  | 1 [          | + <b>\$</b> 180 = . |  | OR | + \$ 360 =          |                        |
|                            |   |   |                                      |   |                            |  |              | TAL ADDIT.<br>FEE   |  | OR | TOTAL ADDIT.<br>FEE |                        |
|                            |   | (Column 1)  |                                      | (Colun  | mn 2)                      | (Column 3)                             |              |                     |  |    |                     |                        |
| INT B                      |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |                                      | HIGHI<br>NUME<br>PREVIO<br>PAID I                                       | IEST<br>BER<br>OUSLY       | PRESENT<br>EXTRA                       |              | RATE                | ADDI-<br>TIONAL<br>FEE                           |    | RATE                | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT                  | Total   | •   | Minus                                | **  |                            | =                                      | 7            | X \$ 25 =           |  | OR | X \$ 50 =           |                        |
| AME                        | Independent   | *   | Minus                                | ***   |                            | =                                      | ×            | \$ 100 =            |  | OR | X \$ 200 =          | ,                      |
|                            | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                                |   |                                      |   |                            |  | -            | \$ 180 =            |  | OR | + \$ 360 =          | •                      |
| TOTAL ADDIT.<br>FEE        |   |   |                                      |   |                            |  |              |                     |  | OR | TOTAL ADDIT.<br>FEE |                        |
| ***                        | If the "Highest Nur<br>If the "Highest Nur                                    | imn 1 is less than the<br>imber Previously Paid<br>imber Previously Paid in<br>ther Previously Paid i | d For" IN THIS :<br>d For" IN THIS : | SPACE is less<br>SPACE is less  | s than '20'<br>s than '3'. | 0", enter "20".<br>. enter "3".        | f in the ap  |                     | in column 1.                                     |    | •                   |                        |

**Application or Docket Number**